



**May 2006**

## **Doctor of Nursing Practice – University of Washington**

### **Introduction**

The University of Washington is seeking Higher Education Coordinating Board approval to offer a Doctor of Nursing Practice (DNP) degree. On April 20, 2006 the board received a proposal to establish a Doctor of Nursing Practice degree program at the University of Washington (UW). The proposal has been circulated among Washington higher education stakeholders and posted on the board's Web site for a 30-day comment period, which closed on May 21, 2006.

The program was initially scheduled for board review at the July 27 meeting. However, the institution recently learned that the program must receive board approval by June 1 in order to be eligible for a grant from the U.S. Health Resource Service Administration (HRSA). The HRSA grant would provide \$1 million to further develop the program and help fund the incoming class. In light of this development, UW requested an expedited review of the proposal.

The board's education committee met by conference call on May 23, 2006 to discuss the proposal. The committee approved moving the proposal to the full board for consideration at its May 2006 meeting.

The Doctor of Nursing Practice program is being proposed in response to the increasing complexity of the healthcare industry and in recognition of increased requirements that have been added to the master's curriculum over time. The DNP program would train students to be nurse practitioners, clinical nurse specialists, certified nurse midwives, and community health nurses. With the implementation of the DNP program, the UW School of Nursing would gradually phase out practice-oriented nursing master's degrees in these fields. The program would be the first DNP program in the Northwest, and one of only a few nationally. The proposed program would begin in fall 2007 and would enroll 30 students in the first year, growing to 270 students at full enrollment in the seventh year. However, with the gradual elimination of the other master's programs, addition of the DNP degree would not represent overall growth in graduate enrollment within the School of Nursing.

## Relationship to Institutional Role and Mission and the Strategic Master Plan

The primary mission of the University of Washington is the preservation, advancement, and dissemination of knowledge. Consistent with this mission, the School of Nursing focuses on research, practice, and teaching. While the Ph.D. in Nursing Science will continue to prepare the next generation of nursing faculty and researchers, the new DNP program emphasizes the advancement of nursing practice, which is currently the focus of the practice-oriented master's degree.

Program goals are consistent with those of the *2004 Statewide Strategic Master Plan*, in that they provide opportunities for students to earn degrees and respond to the state's economic needs. The proposed degree program would respond to changing demands within the industry and help address a critical shortage area. Nurses at all levels are in high demand; moreover, changes in the healthcare system and demographic changes have created a pressing need for higher levels of training in nursing. In addition, expanding the capacity of nursing programs in order to train more registered nurses requires a substantial pool of qualified faculty.

## Program Need

The proposal responds to needs expressed by students, employers, and community stakeholders. The *State and Regional Needs Assessment (HECB)* finds a substantial gap between the supply of prepared graduates in the healthcare industry and projected employer demand. Almost half of the demand for additional training within the healthcare fields is in nursing.

Like most occupations, the nursing profession is undergoing substantial changes that require more highly trained workers who can readily adapt to new systems and new technology, and who can actively participate in improving the quality and efficiency of care. The DNP program would prepare nurses for expert clinical practice and leadership roles in an environment of increasingly complex care and changing patient demographics -- including a growing demand for chronic care among an aging population.

Washington State and the rest of the nation are in the midst of a nursing shortage. A key bottleneck in the effort to increase the number of registered nurses is a limited pool of qualified faculty. This is exacerbated by looming retirements of current faculty. For example, 44 percent of the UW SoN faculty is within 10 years of retirement age. Nationally, the average age of full-time nurse faculty with doctorates is 53. The DNP program would help to meet the need for expert clinical leaders and clinical teachers.

The department indicates that student demand for the program is high. Eighty percent of all Master's in Nursing students at the UW are enrolled in the focus areas of the DNP program. A common concern among master's graduates is a desire for more clinical experience within the program; this would be addressed in the DNP program. The program would enroll 20 post-master's UW nursing faculty members and clinical instructors in the first year, and additional faculty and instructors would be expected to enroll in subsequent years.

The University of Washington would be the first institution in the Northwest to offer the DNP degree, and one of only a few in the nation. There is no indication that Washington State University plans to add a DPN program. However, WSU is developing a Ph.D. in nursing program. While the local private institutions are considering the change to a DNP program, none have made a commitment to move their master's programs to DNP programs.

## **Program Description**

The proposed Doctor of Nursing Practice program would prepare registered nurses as clinicians for advanced nursing practice in health and illness, with expanded clinical inquiry and leadership knowledge and competencies. The DNP would respond to local, state, and national healthcare challenges. Graduates would be better able to address the increasingly complex healthcare needs of a diverse population, using evidence-based clinical guidelines, clinical inquiry investigative skills, and leadership competencies.

The program builds upon existing master's programs, adding both depth and breadth to the current offerings. The curriculum would consist of existing coursework and new coursework in practice inquiry, leadership, systems, and policy. The program also adds a capstone residency experience. Faculty of the school of nursing have expended considerable effort differentiating the DNP program, both from the Ph.D. program and from the existing master's programs that the DNP would eventually replace.

The program would allow for the phasing out of the master's degrees in the same fields. The transition is expected to be complete within seven years, based on student demand. The Family Nurse Practitioner program would transition by fall 2007, and the remaining programs would phase out more gradually.

Admission criteria for the master's programs have been adapted for the DNP program. In addition to a review of each applicant's academic record, goal statement, work experience, leadership experience, and other factors, the program would require an interview and a proctored essay. The interview would focus on the applicant's commitment to the expanded program and would seek responses to clinical scenarios. The essay would require applicants to write about personal and professional challenges they have faced. The primary goal would be to assess each applicant's ability to think and communicate spontaneously, both verbally and in writing.

In the first year, the program would accommodate 30 FTE students. The program would grow to approximately 270 FTE students by the seventh year. The early cohorts would include several nursing faculty members and clinical instructors.

The program would draw on a large and experienced faculty. Nearly 100 faculty within the School of Nursing are members of the graduate faculty.

The program proposal includes clearly defined student learning objectives that are associated with program goals and coursework. Students would be assessed prior to beginning their studies, with a focus on student qualifications and diversity. During the program, students would be

assessed through traditional approaches, including exams, grades, clinical ratings, retention, and completion. Finally, students would be assessed through follow-up surveys one, three, and five years after graduation to examine professional contributions; this phase would include employer and peer surveys in addition to student surveys.

Program goals are clearly defined and aligned with student learning outcomes. The program would be assessed continuously through a variety of measures. Evaluation would include students, faculty, clinical instructors, employers, and other stakeholders. The program evaluation would use multiple measures at various intervals, including interviews and observations.

## **Diversity**

The proposal identifies several specific strategies based on the School of Nursing's strategic plan to attract and retain a diverse student body. The program would collaborate with offices on campus, external associations and organizations, and employers to target outreach efforts and identify and attract diverse students. In addition, the program is in the process of raising funds to support the recruitment of diverse students. Finally, the plan outlines strategies to support a "diversity-friendly" climate within the School of Nursing.

## **External Review**

The program was reviewed by three external experts: Donna Hathaway, professor and dean, College of Nursing, University of Tennessee; Patricia Benner, professor and chair, Department of Social and Behavioral Sciences, University of California San Francisco; and Ada Sue Hinshaw, dean and professor, University of Michigan School of Nursing.

All three reviewers expressed support for the program and acknowledged the need for programs to move in this direction. Two of the three had recently served as reviewers for the UW nursing program's 10-year review and so were very familiar with the School of Nursing as a whole.

Hathaway discussed general concerns she might have about a change of this nature and her specific assessment of the proposed degree program. Her overall assessment is that "the faculty has clearly worked through many of the issues surrounding implementation of the practice doctorate and has done an impressive job of defining this new degree preparation, why it is needed, and what contributions it will make to healthcare." Hathaway was impressed by the clarity in distinguishing the program from the Ph.D. program, as well as defining how it would build upon the master's curriculum. She cautioned that the DNP program must ensure that the programs work together to maintain contact among students and faculty.

Benner strongly supports the proposed degree program. She noted the increased number of credits required for advanced practice nursing master's degrees as a key reason why institutions need to transition to doctoral programs. She indicated that "the UW program would become the gold standard for DNP programs in the country." Benner pointed to high employer and student

demand for programs in this area. Finally, she suggested that the DNP would be key to the UW maintaining its leadership position in nursing education.

Hinshaw enthusiastically supports the proposed program, citing the complexity of the healthcare field and requisite training requirements. She also discussed the importance of a clear distinction between the DNP and Ph.D. programs.

## **Program Costs**

The program would enroll 30 FTE students in the first year, growing to 270 FTE students by the seventh year of the program. The program would draw on existing faculty expertise. Program costs are estimated based on the portion of SoN graduate enrollments in the DNP program. The program estimates the faculty-time equivalent to 5.51 full-time faculty in the first year and 41.35 FTE faculty in the seventh year. Administrative and clerical costs are based on 5.25 FTE in the first year and 10.5 FTE in the seventh year.

No capital or library improvements are indicated in the proposal.

In the first year of the program, with an entering class of 30 FTE, costs are estimated to be \$25,619 per FTE. At full enrollment in year seven (270 FTE), the cost would be \$16,136 per FTE. The average direct cost of instruction for graduate programs in Health Science at the University of Washington is \$18,024.

## **Staff Analysis**

The proposed program would support the unique role and mission of the institution and the department. The proposed degree program would advance nursing practice and help the university maintain its leadership position in nursing education.

The program also responds to the master plan's goals of providing opportunities for students to earn degrees and responding to the economic needs of the state by providing students an opportunity to earn a degree that would prepare them for work in a high-need field. In addition, it would serve to prepare clinical faculty who are desperately needed in order to continue to maintain and grow the state's capacity to train new nurses.

The proposed program includes an assessment approach with well-defined student learning outcomes that are aligned with a well-defined set of program objectives. The proposal indicates a comprehensive assessment approach that would evaluate students and the program at definite intervals using numerous information sources with a goal of continuous program improvement.

The program responds to demonstrated student, employer, and community needs, and is consistent with the state and regional needs assessment and the institution's own assessment of

need. The program would place special emphasis on providing trained clinicians to rural sites, building on its current track record in this area.

In addition, the program would align with the UW School of Nursing strategic plan, which calls for the recruitment and retention of a diverse student body through a variety of approaches.

The program would not duplicate existing programs and would be offered at a reasonable cost.

### Education Committee Discussion

Board members and staff had an opportunity to discuss the proposed program with institutional representatives at a special meeting of the education committee on May 23, 2006. In the course of that discussion, a number of key questions were raised that required further analysis. The table below summarizes the staff analysis related to concerns that came out of that discussion.

Questions	Staff Analysis
To what extent is the program proposal driven by student and employer demand, or is it primarily driven by other factors -- such as credentialism prompted by accreditation requirements?	<p>The Doctor of Nursing Practice is not required for certification or licensure. Rather, it is an emerging degree that responds to increasing complexity in the healthcare industry, demand for faculty, and recommendations of the American Association of Colleges of Nursing (AACN), which accredits the program.</p> <p>Demand for nurses at all levels is expected to remain high for the foreseeable future, fueling demand for doctoral-prepared nurses. An AACN analysis indicates that the ongoing nursing shortage is exacerbated by a shortage of qualified faculty. The shortage of nursing faculty is likely to be made worse soon, when a substantial portion of the existing pool of qualified faculty reaches retirement age.</p>
Why is a doctorate needed rather than a master's, and what implications does this have for other master's programs in the state?	<p>The UW has placed an increasing number of requirements on its master's students. This trend is also seen nationally. AACN reports that many advanced practice nursing programs have added requirements -- especially in the required clinical practice hours -- such that nursing master's degrees now require nearly the same number of credits as a doctorate. The university's proposed change to doctoral-level preparation will allow additional time in clinical residency and</p>

	<p>additional preparation in key areas, such as evidence-based decision making. The UW School of Nursing reports that their master's graduates have indicated a need for additional clinical experience in order to be well prepared for their careers.</p> <p>AACN recommends that master's programs make the transition to doctorate level programs. The UW School of Nursing hopes to join a dozen schools across the country that currently offer a DNP program. UW faculty believe their position as the number one nursing program in the country positions them well to be a leader, set the agenda, and produce standards for other master's programs to follow. They anticipate other programs will likely need to move to a doctorate level program within the decade.</p>
Will graduates of the program fulfill a statewide need?	<p>The program would serve a need for clinical faculty and for advanced practice nurses in the community. For example, nurse practitioners provide primary care services that are in high demand in rural communities, as well as care to urban poor and other underserved communities. The American College of Obstetricians and Gynecologists identifies Washington as a “Red Alert” state—meaning that the availability of physicians to deliver obstetric care is at crisis level. Nurse midwives are qualified to help meet this need by providing primary care to women and newborns.</p>
Will graduates enter positions as nursing educators or as professional clinical practitioners?	<p>Graduates would likely enter occupations either in clinical practice or as faculty, or in some cases as both. AACN analysis of the nursing profession indicates that increasing numbers of nurses prepared at the master's and doctoral levels are entering occupations other than teaching. This trend is contributing to the aging of the faculty pool. In addition, an increasing number of nurse educators are continuing to work in practice in addition to their faculty roles. According to the U.S. Bureau of Labor Statistics occupational outlook handbook, advanced practice nursing specialties—clinical nurse</p>

	specialists, nurse anesthetists, nurse midwives, and nurse practitioners are in especially high demand and require at least a master's degree.
What would the impact of the program be on current master's degree holders?	A change in the credentialing requirement would likely occur over a long period of time. It would most likely be similar to how the transition was made for nurse practitioners. The requirement for nurse practitioner moved from a post-baccalaureate certificate to a master's in nursing about 15 years ago. This occurred only after master's in nursing programs had been well established across the country. In Washington, the new requirement only affected newly trained nurse practitioners. Those who already held the post-baccalaureate certificate were not required to return to obtain a master's degree.
Does sufficient student demand exist to support the proposed enrollment levels?	<p>The current master's degree program enrolls over 240 students. The School of Nursing currently offers two pathways to the master's in nursing. During the past admission cycle, the program received a total of 300 applications; of those, over 140 were turned away primarily due to space limitations.</p> <p>Over time, the DNP program would replace the master's in nursing program. In addition to the current demand for the master's program, the DNP program would also attract students who already possess a master's in nursing and want to continue their studies and complete a doctorate. The program has received over 500 inquiries from interested students over the past year, including a high level of interest from clinical faculty at the university and community colleges.</p>

## Recommendation

Based on careful review of the program proposal and supplemental sources, board staff recommend approval of the Doctor of Nursing Practice at the University of Washington.



**RESOLUTION NO. 06-14**

WHEREAS, The University of Washington proposes to offer a Doctor of Nursing Practice; and

WHEREAS, The program would support the unique role and mission of the institution; and

WHEREAS, The program would respond to demonstrated student, employer, and community needs that are consistent with the state and regional needs assessment and the institution's own assessment of need; and

WHEREAS, The recruitment and diversity plans are appropriate to the program and recognize the need to recruit and retain a diverse student body; and

WHEREAS, The program has received support from external experts; and

WHEREAS, The costs are reasonable;

THEREFORE, BE IT RESOLVED, That the Higher Education Coordinating Board approves the Doctor of Nursing Practice at the University of Washington.

Adopted:

May 25, 2006

Attest:

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Gene J. Colin, Chair

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Jesus Hernandez, Secretary